

# Developmental Disabilities Advisory Council Meeting Agenda and Minutes

Dat	:e	June 3, 2021
Time		2:00pm – 4:00pm
Location		Call In Information: <a href="https://uwyo.zoom.us/j/202849015">https://uwyo.zoom.us/j/202849015</a> , (669) 900-6833, Meeting ID: 202 849 015
Purpose		To assist and advise the Division of Healthcare Financing (Division) in implementing a statewide service delivery system for persons who are identified as having developmental and intellectual disabilities, and acquired brain injuries (ABI).
Members		Rita Basom, Ginny Chidsey, <del>Maria Clark</del> , Brenda Dick, Heather Dodson, Jeff Gardner, Kayla Green, Buck Gwyn, Arkansas Le Marr, <del>Erin O'Neill</del> , Sandy Root-Elledge, <del>Bob Sell</del>
Division Staff		Matt Crandall, Elizabeth Forslund, Lee Grossman, Heidi Hoffman, Jeff Oliver, Shirley Pratt
AGENDA ITEMS/KEY POINTS DISCUSSED		
		Topics and Highlights
1.	Roll call and approval of minutes  Jeff called the meeting to order at 2:02pm. Council members welcomed Brenda Dick, who is representing the Division of Vocational Rehabilitation, to the Council. Rita moved to approve the minutes of March 4, 2021 as circulated; Kayla seconded. Motion carried.	
2.	<ul> <li>American Rescue Plan Act (ARPA)</li> <li>The American Rescue Plan Act of 2021 (ARPA) was signed into law by President Biden on March 11, 2021 and provides additional Federal relief to address the continued impact of Coronavirus Disease 2019 (COVID-19) on the economy, public health, state and local governments, individuals, and businesses. It is intended, in part, to support states in enhancing services for individuals who are eligible for long-term care and home and community-based services (HCBS), including participants of the Comprehensive, Supports, Community Choices, and Children's Mental Health Waivers, and selected home health and rehabilitation services provided through the Medicaid State Plan.</li> <li>Section 9817 of ARPA addresses additional support provided to Medicaid HCBS during the COVID-19 emergency. The law includes a provision to increase the federal reimbursement for Medicaid HCBS by 10% from April 1, 2021 through March 31, 2022. According to this Section, in order to be eligible to receive the increase, the State must use the Federal funds to supplement, and not supplant, the level of State funds expended for HCBS programs in effect as of April 1, 2021. This means that the state cannot apply stricter eligibility requirements, must maintain the type, scope, and amount of services, and must maintain provider payment rates. This maintenance of effort must be in place until all additional funding is expended.</li> <li>The State must implement, or supplement the implementation of, one or more activities to enhance, expand, or strengthen HCBS under the State Medicaid program.</li> <li>States have received additional guidance on ARPA, and the overall understanding of the Act improves daily. States must submit an initial spending plan and narrative by July 11, 2021, and must submit a quarterly update of the plan and narrative until such time as the funds are expended. Summary documents that provide additional information will be sent to the Council after the meeting.</li></ul>	



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- The Division is currently drafting its spending plan, which will include feedback received during listening sessions held in early April.
- <u>Member question</u>: SEA072 provides that ARPA funding may be used for any purpose allowed by the CARES Act. Does SEA072 limit the Department of Health's response to CARES Act purposes or does the Department have the full authority permitted by ARPA, as well? Is the State considering ARPA Section 9813 funding for community-based mobile crisis intervention services, with an initial 85%-15% FMAP, beginning April 1, 2022 and running for five years, to prevent or reduce unnecessary institutionalization? <u>Division response</u>: The Division will need to review, but at this time we are not aware of any restrictions. The crisis intervention 85%-15% FMAP is an area of interest, but not a priority given the extended timeline. We don't have plans to pursue at this moment, but we are aware that it is an opportunity.
- <u>Member question</u>: Will the state be responsible for coming up with money to match the federal portion of the FMAP increase? <u>Division response</u>: No. State funding will stay flat. The 10% increase will be an increase to the overall FMAP, which will change from 50% federal and 50% state to 60% federal and 40% state. The 10% the state does not expend will be put into a separate account and used for the purposes described in the spending plan.
- The HCBS Section is taking the lead on drafting and submitting the spending plan and narrative; however, the Section will collaborate with other programs to ensure the plan includes all Division priorities.
- <u>Member question</u>: Will each program's spending be proportional to the program dollars that
  make up the increase? <u>Division response</u>: No. The spending of the additional funding may not be
  proportional to how each program's current expenditures contribute to the overall calculation of
  the increased FMAP.
- <u>Member question</u>: Since this is one-time funding, is the Division's focus on one-time expenditures?
   <u>Division response</u>: The Division is focusing on one-time expenditures, but is also considering how to incorporate longer term net benefits, such as standing up transitional services.
- Activities the Division is considering include, but are not limited to:
  - Workforce training, including skill building for case managers and direct support professionals;
  - Additional assistive technology services;
  - Additional supported employment services;
  - Planning initiatives, such as Aging and Disability Resource Center/No Wrong Door; and
  - Temporary increases of provider reimbursement rates.

### **Division updates**

- Budget
  - During the last legislative session, proposed Phase 3 reductions were restored. Additionally, the elimination of therapies, skilled nursing, dietician, and homemaker services were restored.
     This is a temporary restoration. The Division will need to submit an exception request to avoid these reductions in the next budget.
- Rate rebasing
  - The Division and Guidehouse continue to work on this project. Guidehouse has completed
    the analysis of cost survey data, conducted research to support rate model development such
    as economies of scale and benefit factor components, and has started drafting the overall rate
    model.

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- The final rate calculations and fiscal impact will be ready by August 1, 2021. The final report will be submitted to the Division by October 1, 2021.
- Additional federal policy initiatives
  - In public discussion and declarations, the American Jobs Act may include as much as \$400 Billion in additional investments focusing on workforce recruitment and retention for Medicaid HCBS. It also addresses the elimination of 14(c) subminimum wage certificates.
     Subminimum wage employment has not been supported through Wyoming waiver programs since 2014.
  - The Home and Community-Based Access Act (HAA) would make HCBS mandatory, rather than voluntary. States wouldn't be able to restrict enrollment or implement waitlists. This is only being discussed at this time and is not an active piece of federal legislation.
  - <u>Member comment</u>: It is encouraging that policymakers at the highest level are discussing home and community-based services on so many fronts. These changes could represent the most significant changes to waiver services since waivers were implemented.

### • COVID-19 recovery

- COVID flexibilities are in place through calendar year 2021. The Division is working on a white paper that will present COVID cases and deaths related COVID, and will include the Medicaid population at large. The Division cannot release DD specific data on COVID deaths as the number of deaths is small enough that it would be considered identifiable information and violate Health Insurance and Portability and Accountability Act (HIPAA) regulations.
- Member question: Does the Division have information on the number of participants and provider staff members who have been vaccinated? <u>Division response</u>: The Division does not have reliable data on this topic, but is trying to aggregate. Data collected will most likely be an undercount. <u>Member comment</u>: The survey that the Wyoming Governor's Council on Developmental Disabilities (WGCDD) has distributed quarterly is a COVID impact survey, and is intended to identify barriers or access issues during COVID. The WGCDD has had a very low response rate for the most recent quarter, but they will share information if they receive it.
- The Department of Health encourages everyone to get vaccinated.

### NCI Staff Stability Survey

- The National Core Indicators (NCI) Staff Stability Survey is intended to examine the landscape of the direct support professional workforce and to inform policy discussion related to what has been described as a workforce crisis. The Division entered into this project at the request of an earlier DD Advisory Council.
- Current provider participation is very low, and may result in Wyoming's data being eliminated from the final report. The Division will continue to be persistent and request providers to respond, but all Council members are asked to encourage all providers that meet the qualifications for national accreditation to participate. The last day to submit the survey is June 30, 2021.
- If a provider has questions or has lost their link to the survey, they can contact Heidi Hoffman at heidi.hoffman3@wyo.gov.

### Electronic visit verification (EVV)

 The Division has targeted October 2021 as the implementation date for electronic visit verification of traditional DD Waiver services. Carebridge, the Division's contractor, is focusing



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on education at this time. The Division will have more information on this topic at the September 2 meeting.

- <u>Member question</u>: Does the Division have an update on including CLS Basic services in EVV?
   <u>Division response</u>: The Division does not have updates, but will report if there are changes.
- Provider background screening process
  - The Division continues to refine the background screening process, and is close to implementing the new process that will remove the Division and allow providers to go directly to the screening entities to pay for screenings and receive screening results. The Division will communicate this information to providers before implementing the process.
  - <u>Member comment</u>: This is a positive step. Providers appreciate the efforts the Division has made in making this change.

### Member updates

- The Wyoming Department of Education is holding several on-line and in-person conferences
  throughout the summer, many of which would be very appropriate for providers of DD services.
  Please visit <a href="https://edu.wyoming.gov/educators/conferences/">https://edu.wyoming.gov/educators/conferences/</a> and reach out to the specific
  coordinator regarding credit being offered. Additionally, the Web-based Vision & Excellence
  Symposium (WAVES) will kick off in August. Dr. Temple Grandin will be the keynote speaker for the
  kickoff.
- The Division of Vocational Rehabilitation has seen an increase in people accessing their services now that the enhanced unemployment benefit has been eliminated.
- The WGCDD has sent the 4th quarter COVID impact survey. Responses to previous quarters are 70 responses/ 170 responses / 40 responses/ < 10 responses. The WGCDD will keep the survey on their website in case anyone chooses to respond. The Annual Developmental Disability conference will be held at the Red Lion Hotel and Conference Center on June 24 25, 2021. Jeff Gardner and Lee Grossman will be keynote speakers, and Jeff Gardner and Tina Conley will present a session on what participants should expect from their providers. The WGCDD 5-year plan is currently open for public comment.</p>
- The University of Wyoming employees will begin heading back campus the week of June 7, 2021, and will be fully back to the office by the time classes start in August. Two WIND staff members are serving on a healthcare task force which is intended to improve healthcare access across the state. WIND received funding for vaccination promotion for individuals with intellectual and developmental disabilities. They will be collaborating with 5 states across the region, and will be conducting virtual interviews with participants.

### **Bylaws Review**

Ginny presented the proposed changes to the DDAC Bylaws. The Council requested additional changes that included updating Protection & Advocacy System, Inc. Rita moved to accept the Bylaws with the additional changes. Motion approved by a two-thirds vote of the Council.

6. Public Comment

There was no public comment offered during the public comment period.

**NEXT MEETING – September 2, 2021** 

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